



NOTICE OF APPEAL FROM THE PRIMARY EXAMINER  
TO THE BOARD OF APPEALS

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Applicants: Hui Chen and John W. Lawler  
Application No.: 09/606,763 Group: 1653 ✓  
Filed: June 29, 2000 Examiner: Chih Min Kam  
Confirmation No.: 7609  
For: Purification and Use of Human Recombinant Cartilage  
Oligomeric Matrix Protein

CERTIFICATE OF MAILING OR TRANSMISSION	
I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as First Class Mail in an envelope addressed to Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, or is being facsimile transmitted to the United States Patent and Trademark Office on:	
10/09/03	<i>Carol M. Bowerman</i>
Date	Signature
Carol M. Bowerman	
Typed or printed name of person signing certificate	

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Sir:

Applicant hereby appeals to the Board of Appeals from the decision dated June 10, 2003 of the Primary Examiner finally rejecting claims 37 and 90. The items checked below are appropriate:

1. ☒ Applicant hereby petitions to extend the time for filing a Notice of Appeal in response to the Office Action Made Final dated June 10, 2003 for one month from September 10, 2003 to October 10, 2003.
2. ☐ A  month extension of time to respond to the Office Action Made Final dated  was filed on  with payment of a \$ fee.  
☐ Applicant hereby petitions for an additional  month extension of time to respond to the Office Action Made Final.
3. ☐ A Request for Oral Hearing before the Board of Patent Appeals and Interferences is being filed concurrently herewith.

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01 FC:2401  
02 FC:2251  
165.00 00  
55.00 00

## 4. Fees are submitted for the following:

<input checked="" type="checkbox"/>	Extension of Time for one month		\$	<u>55.00</u>
<input type="checkbox"/>	Additional Extension of Time:			
	Fee for Extension	( <input type="checkbox"/> mo.)	\$	<u>          </u>
	Less fee paid	( <input type="checkbox"/> mo.)	- \$	<u>          </u>
	Balance of fee due		\$	<u>0</u>
<input checked="" type="checkbox"/>	Notice of Appeal		\$	<u>165.00</u>
<input type="checkbox"/>	Other		\$	<u>          </u>
			TOTAL	<u>\$ 220.00</u>

## 5. The method of payment for the total fees is as follows:

- ☒ A check in the amount of \$220.00 is enclosed.
- ☐ Please charge Deposit Account No. 08-0380 in the amount of \$[            ].

Please charge any deficiency or credit any overpayment in the fees that may be due in this matter to Deposit Account No. 08-0380. A copy of this document is enclosed for accounting purposes.

Respectfully submitted,

HAMILTON, BROOK, SMITH, REYNOLDS, P.C.

By Carol A. Egner  
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Date: October 9, 2003